

County: Racine  
OAK RIDGE CARE CENTER, INC.  
1400 8TH AVENUE

Facility ID: 6610

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UNION GROVE 53182 Phone:(262) 878-2788  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/02): 76  
Total Licensed Bed Capacity (12/31/02): 78  
Number of Residents on 12/31/02: 71

Ownership: Corporation  
Highest Level License: Skilled  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 69

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		49.3
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		39.4
Supp. Home Care-Household Services	No	Developmental Disabilities	1.4	Under 65	5.6	More Than 4 Years		11.3
Day Services	No	Mental Illness (Org./Psy)	42.3	65 - 74	4.2			-----
Respite Care	No	Mental Illness (Other)	2.8	75 - 84	36.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	4.2	95 & Over	7.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	9.9		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	7.0	65 & Over	94.4	-----		
Transportation	No	Cerebrovascular	12.7		-----	RNs		11.3
Referral Service	No	Diabetes	4.2	Sex	%	LPNs		5.8
Other Services	Yes	Respiratory	7.0	-----	-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	5.6	Male	21.1	Aides, & Orderlies		
Mentally Ill	No		-----	Female	78.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care		
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)
Int. Skilled Care	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Skilled Care	9	100.0	307			39	92.9	115	0	0.0	0	20	100.0	165	0	0.0	0	0	0.0	68
Intermediate	---	---	---			3	7.1	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	3
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Total	9	100.0				42	100.0		0	0.0		20	100.0		0	0.0		0	0.0	71

100.0

Admissions, Discharges, and Deaths During Reporting Period						Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02				
						-----				
Percent Admissions from:						Activities of	%	% Needing Assistance of	% Totally	Total
						Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	6.5							73.2	23.9	71
Private Home/With Home Health	0.0					Bathing	2.8			
Other Nursing Homes	2.2					Dressing	2.8	81.7	15.5	71
Acute Care Hospitals	83.9					Transferring	11.3	67.6	21.1	71
Psych. Hosp.-MR/DD Facilities	0.0					Toilet Use	7.0	78.9	14.1	71
Rehabilitation Hospitals	2.2					Eating	67.6	15.5	16.9	71
Other Locations	5.4					*****				
Total Number of Admissions	93					Continence		%	Special Treatments	%
Percent Discharges To:						Indwelling Or External Catheter		4.2	Receiving Respiratory Care	7.0
Private Home/No Home Health	4.5					Occ/Freq. Incontinent of Bladder		60.6	Receiving Tracheostomy Care	0.0
Private Home/With Home Health	22.7					Occ/Freq. Incontinent of Bowel		35.2	Receiving Suctioning	1.4
Other Nursing Homes	4.5								Receiving Ostomy Care	1.4
Acute Care Hospitals	13.6					Mobility			Receiving Tube Feeding	2.8
Psych. Hosp.-MR/DD Facilities	0.0					Physically Restrained		7.0	Receiving Mechanically Altered Diets	23.9
Rehabilitation Hospitals	0.0									
Other Locations	8.0					Skin Care			Other Resident Characteristics	
Deaths	46.6					With Pressure Sores		5.6	Have Advance Directives	100.0
Total Number of Discharges						With Rashes		1.4	Medications	
(Including Deaths)	88								Receiving Psychoactive Drugs	60.6

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility	Ownership: Proprietary	Bed Size: 50-99	Licensure: Skilled	All Facilities				
	%	Peer Group Ratio	Peer Group Ratio	Peer Group Ratio	% Ratio	% Ratio	% Ratio	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	87.9	84.7	1.04	87.1	1.01	85.3	1.03	85.1	1.03
Current Residents from In-County	77.5	81.6	0.95	81.5	0.95	81.5	0.95	76.6	1.01
Admissions from In-County, Still Residing	35.5	17.8	2.00	20.0	1.77	20.4	1.74	20.3	1.75
Admissions/Average Daily Census	134.8	184.4	0.73	152.3	0.88	146.1	0.92	133.4	1.01
Discharges/Average Daily Census	127.5	183.9	0.69	153.5	0.83	147.5	0.86	135.3	0.94
Discharges To Private Residence/Average Daily Census	34.8	84.7	0.41	67.5	0.52	63.3	0.55	56.6	0.62
Residents Receiving Skilled Care	95.8	93.2	1.03	93.1	1.03	92.4	1.04	86.3	1.11
Residents Aged 65 and Older	94.4	92.7	1.02	95.1	0.99	92.0	1.03	87.7	1.08
Title 19 (Medicaid) Funded Residents	59.2	62.8	0.94	58.7	1.01	63.6	0.93	67.5	0.88
Private Pay Funded Residents	28.2	21.6	1.31	30.0	0.94	24.0	1.18	21.0	1.34
Developmentally Disabled Residents	1.4	0.8	1.77	0.9	1.53	1.2	1.19	7.1	0.20
Mentally Ill Residents	45.1	29.3	1.54	33.0	1.36	36.2	1.25	33.3	1.35
General Medical Service Residents	5.6	24.7	0.23	23.2	0.24	22.5	0.25	20.5	0.27
Impaired ADL (Mean)	50.1	48.5	1.03	47.7	1.05	49.3	1.02	49.3	1.02
Psychological Problems	60.6	52.3	1.16	54.9	1.10	54.7	1.11	54.0	1.12
Nursing Care Required (Mean)	5.5	6.8	0.81	6.2	0.88	6.7	0.81	7.2	0.76